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BIBDATASHEET**CONFIRMATION NO. 7589**

Bib Data Sheet

SERIAL NUMBER 09/812,136	FILING OR 371(c) DATE 03/19/2001 RULE	CLASS 709	GROUP ART UNIT 2151	ATTORNEY DOCKET NO. P70502US0
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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
**** 04/25/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 8	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS
136

TITLE

SYSTEM AND METHOD FOR MONITORING AND MANAGING AN ENTERPRISE NETWORK

FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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